#### RCFE: Post-Licensing Tool<sup>1</sup>

**Post-licensing visits** are inspections to evaluate compliance with statutes and regulations and to assess the facility's ability to meet statutory and regulatory requirements, after accepting its first resident.

The licensee must notify the department, within five business days after accepting its first resident for placement that the facility has commenced operating, pursuant to H&S 1569.24.

Post-licensing Visits are required to be conducted within 90 days after a facility accepts its first resident for placement, following its initial licensure.

#### Post-licensing visits are unannounced

Requirement	Citation
CCLD Authority to Inspect	
Authority to Enter and Inspect	H&S §1569.32, H&S §1569.33(a)
<b>H&amp;S §1569.32.</b> Any duly authorized officer, employee, or agent of the department may, upon presentation of proper identification, enter and inspect any place providing personal care, supervision, and services at any time, with or without advance notice, to secure compliance with, or to prevent a violation of, this chapter.	T-22, §87755(a) & (c)
<b>H&amp;S §1569.33.</b> (a) Every licensed residential care facility for the elderly shall be subject to unannounced inspections by the department. The department shall inspect these facilities as often as necessary to ensure the quality of care provided.	
<b>T-22, §87755.</b> (a) Any duly authorized officer, employee or agent of the licensing agency may, upon proper identification and upon stating the purpose of his/her visit, enter and inspect the entire premises of any place providing services at any time, with or without advance notice.	
(c) The licensing agency shall have the authority to inspect, audit, and copy resident or facility records upon demand during normal business hours. Records may be removed if necessary for copying. Removal of records shall be subject to the requirements in Sections 87412(f), 87506(d), and 87508(b).	

<sup>&</sup>lt;sup>1</sup> This tool is intended to review the most important <u>measurable</u> requirements, within 90 days of admission of the first resident, after licensure.

Physical Plan/Environmental Safety	
Post License	T-22, §87113
T-22, §87113. The license shall be posted in a prominent location in the licensed facility accessible to public view.	
Capacity and Ambulatory Status	T-22, §87204(a)
T-22, §87204(a) A licensee shall not operate a facility beyond the conditions and limitations specified on the license, including specification of the maximum number of persons who may receive services at any one time. An exception may be made in the case of catastrophic emergency when the licensing agency may make temporary exceptions to the approved capacity.	
<b>T-22, §87204</b> (b) Resident rooms approved for 24-hour care of ambulatory residents only shall not accommodate nonambulatory residents. Residents whose condition becomes nonambulatory shall not remain in rooms restricted to ambulatory residents.	T-22, §87204(b)
Carbon Monoxide Detectors	H&S §1569.311
<b>H&amp;S §1569.311.</b> Every residential care facility for the elderly shall have one or more carbon monoxide detectors in the facility that meet the standards established in Chapter 8 (commencing with Section 13260) of Part 2 of Division 12. The department shall account for the presence of these detectors during inspections.	
<ul> <li>Maintenance and Operation</li> <li>T-22, §87303. (a) The facility shall be clean, safe, sanitary and in good repair at all times. Maintenance shall include provision of maintenance services and procedures for the safety and well-being of residents, employees and visitors. <ul> <li>(1) Floor surfaces in bath, laundry and kitchen areas shall be maintained in a clean, sanitary, and odorless condition.</li> </ul> </li> <li>(b) A comfortable temperature for residents shall be maintained at all areas. <ul> <li>(1) The facility shall heat rooms that residents occupy to a minimum of 68 degree F, (20 degree C).</li> <li>(2) The facility shall cool rooms to a comfortable range, between 78 degrees F (26 degrees C) and 85 degrees F (30 degrees C), or in areas of extreme heat to 30 degrees F less than the outside temperature.</li> <li>(3) Nothing in this section shall prohibit residents from adjusting individual thermostatic controls.</li> </ul> </li> <li>(c) All window screens shall be clean and maintained in good repair.</li> <li>(d) There shall be lamps or light appropriate for the use of each room and sufficient to ensure the comfort and safety of all persons in the facility.</li> <li>(e) Water supplies and plumbing fixtures shall be maintained as follows:</li> </ul>	T-22, §87303(a)(1), (b), (c), (d), (e)(2)- (6), (g)-(i)

- (2) Faucets used by residents for personal care such as shaving and grooming shall deliver hot water. Hot water temperature controls shall be maintained to automatically regulate the temperature of hot water used by residents to attain a temperature of not less than 105 degree F (41 degree C) and not more than 120 degree F (49 degree C).
- (3) Taps delivering water at 125 degree F (52 degree C) or above shall be prominently identified by warning signs.
- (4) Grab bars shall be maintained for each toilet, bathtub and shower used by residents.
- (5) Non-skid mats or strips shall be used in all bathtubs and showers.
- (6) Toilet, handwashing and bathing facilities shall be maintained in operating condition. Additional equipment shall be provided in facilities accommodating physically handicapped and/or nonambulatory residents, based on the residents' needs.
- (f) Solid waste shall be stored and disposed of as follows:
  - (1) Solid waste shall be stored, located and disposed of in a manner that will not permit the transmission of a communicable disease or of odors, create a nuisance, provide a breeding place or food source for insects or rodents.
  - (3) All containers, except movable bins, used for storage of solid wastes shall have tight-fitting covers on the containers; shall be in good repair; shall have external handles; and shall be leakproof and rodent-proof.
  - (5) Solid waste containers, including movable bins, receiving putrescible waste shall be emptied at least once per week or more often if necessary. Such containers shall be maintained in a clean and sanitary condition.
- (g) Facilities which have machines and do their own laundry shall:
  - (1) Have adequate supplies available and equipment maintained in good repair. Space used to sort soiled linen shall be separate from the clean linen storage and handling area. Except for facilities licensed for fifteen (15) residents or less, the space used to do laundry shall not be part of an area used for storage of anything other than clean linens and/or other supplies normally associated with laundry activities. Steam, odors, lint and objectionable laundry noise shall not reach resident or employee areas.
  - (2) Make at least one machine available for use by residents who are able and who desire to do their own personal laundry. This machine shall be maintained in good repair. Equipment in good repair shall be provided to residents who are capable and desire to iron their own clothes.
- (h) Emergency lighting shall be maintained. At a minimum this shall include flashlights, or other battery powered lighting, readily available in appropriate areas accessible to residents and staff. Open-flame lights shall not be used.
- (i) Facilities shall have signal systems which shall meet the following criteria:
  - (1) All facilities licensed for 16 or more and all residential facilities having separate floors or buildings shall have a signal system which shall:
    - (A) Operate from each resident's living unit.

- (B) Transmit a visual and/or auditory signal to a central staffed location or produce an auditory signal at the living unit loud enough to summon staff.
- (C) Identify the specific resident living unit.
- (2) Facilities having more than one wing, floor or building shall be permitted to have a separate system in each, provided each meets the above criteria.

#### **Personal Accommodations and Services**

T-22, §87307

- **T-22, §87307.** (a) Living accommodations and grounds shall be related to the facility's function. The facility shall be large enough to provide comfortable living accommodations and privacy for the residents, staff, and others who may reside in the facility. The following provisions shall apply:
  - (1) There shall be common rooms such as living rooms, dining rooms, dens or other recreation/activity rooms. They shall be of sufficient space and/or separation to promote and facilitate the program of activities and to prevent such activities from interfering with other functions.
  - (2) Resident bedrooms shall be provided which meet, at a minimum, the following requirements:
    - (A) Bedrooms shall be large enough to allow for easy passage between and comfortable usage of beds and other required items of furniture specified below, and any resident assistant devices such as wheelchairs or walkers.
    - (B) No room commonly used for other purposes shall be used as a sleeping room for any resident. This includes any hall, stairway, unfinished attic, garage, storage area, shed or similar detached building.
    - (C) No bedroom of a resident shall be used as a passageway to another room, bath or toilet.
    - (D) Not more than two residents shall sleep in a bedroom.
  - (3) Equipment and supplies necessary for personal care and maintenance of adequate hygiene practice shall be readily available to each resident. The resident may provide the following items; however, if the resident is unable or chooses not to provide them, the licensee shall assure provision of:
    - (A) A bed for each resident, except that married couples may be provided with one appropriate sized bed. Each bed shall be equipped with good springs, a clean and comfortable mattress, available pillow(s) and lightweight warm bedding. Fillings and covers for mattresses and pillows shall be flame retardant. Rubber sheeting shall be provided when necessary.
    - (B) Bedroom furniture, which shall include, for each resident, a chair, night stand, a lamp, or lights sufficient for reading, and a chest of drawers.
    - (C) Clean linen, including blankets, bedspreads, top bed sheets, bottom bed sheets, pillow cases, mattress pads, bath towels, hand towels and wash cloths. The quantity shall be sufficient to permit changing at least once per week or more often when indicated to ensure that clean linen is in use by residents at all times. The linen shall be in good repair. The use of common wash cloths and towels shall be prohibited.

- (D) Hygiene items of general use such as soap and toilet paper.
- (E) Portable or permanent closets and drawer space in the bedrooms for clothing and personal belongings. A minimum of eight (8) cubic feet (.743 cubic meters) of drawer space per resident shall be provided.
- (F) Basic laundry service (washing, drying, and ironing of personal clothing).
- (b) Toilets and bathrooms shall be conveniently located. The licensed capacity shall be established based on Section 87158, Capacity, and the following:
  - (1) At least one toilet and washbasin for each six (6) persons, which include residents, family and personnel.
  - (2) At least one bathtub or shower for each ten (10) persons, which includes residents, family and live-in personnel.
- (c) Individual privacy shall be provided in all toilet, bath and shower areas.
- (d) The following space and safety provisions shall apply to all facilities:
  - (1) Sufficient room shall be available to accommodate persons served in comfort and safety.
  - (2) The premises shall be maintained in a state of good repair and shall provide a safe and healthful environment.
  - (3) All persons shall be protected against hazards within the facility through provision of the following:

T-22, §87468. (a) Each resident shall have personal rights which include, but are not limited to, the following:

- (A) Protective devices such as nonslip material on rugs.
- (B) Information and instruction regarding life protection and other appropriate subjects.
- (4) Stairways, inclines, ramps and open porches and areas of potential hazard to residents with poor balance or eyesight shall be made inaccessible to residents unless equipped with sturdy hand railings and unless well-lighted.
- (5) Night lights shall be maintained in hallways and passages to nonprivate bathrooms.
- (6) All outdoor and indoor passageways and stairways shall be kept free of obstruction.
- (7) Fireplaces and open-faced heaters shall be adequately screened.
- (e) Facilities providing services to residents who have physical or mental disabilities shall assure the inaccessibility of fishponds, wading pools, hot tubs, swimming pools or similar bodies of water, when not in active use by residents, through fencing, covering or other means.

# Security Window Bars H&S §1569.6991 T-22, §87468(a)(6) H&S §1569.6991. On and after January 1, 1999, no security window bars may be installed or maintained on any residential care facility for the elderly unless the security window bars meet current state and local requirements, as applicable, for security window bars and safety release devices.

(6) To leave or depart the facility at any time and to not be locked into any room, building, or on facility premises by day or	
night. This does not prohibit the establishment of house rules, such as the locking of doors at night, for the protection of	
residents; nor does it prohibit, with permission of the licensing agency, the barring of windows against intruders.	
Storage Space	T-22, §87309
T-22, §87309. (a) Disinfectants, cleaning solutions, poisons, firearms and other items which could pose a danger if readily	
available to clients shall be stored where inaccessible to clients.	
(1) Storage areas for poisons, and firearms and other dangerous weapons shall be locked.	
(2) In lieu of locked storage of firearms, the licensee may use trigger locks or remove the firing pin.	
(A) Firing pins shall be stored and locked separately from firearms.	
(3) Ammunition shall be stored and locked separately from firearms.	
(b) Medicines shall be stored as specified in Section 87465(c) and separately from other items specified in (a) above.	
(c) The items specified in (a) above shall not be stored in food storage areas or in storage areas used by or for clients.	
Telephone Service	T-22, §87311
<b>T-22, §87311.</b> All facilities shall have telephone service on the premises. Facilities with a capacity of sixteen (16) or more persons	
shall be listed in the telephone directory under the name of the facility.	
Operational Requirements	<u> </u>
Plan of Operation <sup>2</sup>	T-22, §87208(a),
	(a)(5) & (a)(6)
T-22, §87208. (a) Each facility shall have and maintain a current, written definitive plan of operation. The plan and related	
materials shall be on file in the facility and shall be submitted to the licensing agency with the license application. Any significant	
changes in the plan of operation which would affect the services to residents shall be submitted to the licensing agency for	
approval.	
(5) Staffing plan, qualifications and duties.	
(6) Plan for training staff, as required by Section 87411(c).	
	T-22,
<b>T-22</b> , §87705. (b) In addition to the requirements as specified in Section 87208, Plan of Operation, the plan of operation shall address the needs of residents with dementia, including:	§87705(b)(1)(2)

<sup>&</sup>lt;sup>2</sup> Since the Plan of Operation is being reviewed as a part of application processing, only verify that the plan is on file in the facility.

(1) Procedures for notifying the resident's physician, family members and responsible persons who have requested	
notification, and conservator, if any, when a resident's behavior or condition changes.	
(2) Safety measures to address behaviors such as wandering, aggressive behavior and ingestion of toxic materials.	
Advertising/Promotion of Special Care for Residents with Dementia	H&S §1569.33(h)
<b>H&amp;S §1569.33.</b> (h) As a part of the department's evaluation process, the department shall review the plan of operation, training	
logs, and marketing materials of any residential care facility for the elderly that advertises or promotes special care, special	
programming, or a special environment for persons with dementia to monitor compliance with Sections 1569.626 and 1569.627.	
Residents who are Bedridden	T-22,
	§87606(f)(1)(A)-(C)
T-22, §87606(f) To accept or retain a bedridden person, a facility shall ensure the following:	
(1) The facility's Plan of Operation includes a statement of how the facility intends to meet the overall health, safety and care needs of bedridden persons.	
(A) The facility's Emergency Disaster Plan, addresses fire safety precautions specific to evacuation of bedridden residents in the event of an emergency or disaster.	
(B) In addition to the requirements specified in Care of Persons with Dementia, the needs of residents with dementia	
who are bedridden, shall be met.	
(C) The needs of residents who are terminally ill and who are bedridden shall be met.	
Liability Insurance	H&S §1569.605
<b>H&amp;S §1569.605.</b> On and after July 1, 2015, all residential care facilities for the elderly, except those facilities that are an integral	
part of a continuing care retirement community, shall maintain liability insurance covering injury to residents and guests in the	
amount of at least one million dollars (\$1,000,000) per occurrence and three million dollars (\$3,000,000) in the total annual	
aggregate, caused by the negligent acts or omissions to act of, or neglect by, the licensee or its employees.	
Fire Clearance	T-22, §87202(a)(1)- (2)
T-22, §87202(a) All facilities shall maintain a fire clearance approved by the city, county, or city and county fire department or	
district providing fire protection services, or the State Fire Marshal. Prior to accepting or retaining any of the following types of	
persons, the applicant or licensee shall notify the licensing agency and obtain an appropriate fire clearance approved by the city,	
county, or city and county fire department or district providing fire protection services, or the State Fire Marshal:	
(1) Nonambulatory persons.	
(2) Bedridden persons	
Staffing	
Note: Verify the staffing plan is in the facility plan of operation.	

Excluded Persons	H&S §1569.58(g) T-22, §87777(a)
<b>H&amp;S §1569.58</b> (g) A licensee's failure to comply with the department's exclusion order after being notified of the order shall be grounds for disciplining the licensee pursuant to Section 1569.50. <sup>3</sup>	
<b>T-22, §87777</b> (a) The Department may prohibit an individual from serving as a board of directors, executive director, or officer; being employed or allowed in a licensed facility as specified in Health and Safety Code Sections 1569.58 and 1569.59.	
Administrator Presence	H&S §1569.618(a)
<b>H&amp;S §1569.618</b> (a) The administrator designated by the licensee pursuant to paragraph (11) of subdivision (a) of Section 1569.15 shall be present at the facility during normal working hours. A facility manager designated by the licensee with notice to the department, shall be responsible for the operation of the facility when the administrator is temporarily absent from the facility.	
T-22, §87411 (a) Facility personnel shall at all times be sufficient in numbers, and competent to provide the services necessary to meet resident needs. In facilities licensed for sixteen or more, sufficient support staff shall be employed to ensure provision of personal assistance and care as required in Section 87608, Postural Supports. Additional staff shall be employed as necessary to perform office work, cooking, house cleaning, laundering, and maintenance of buildings, equipment and grounds. The licensing agency may require any facility to provide additional staff whenever it determines through documentation that the needs of the particular residents, the extent of services provided, or the physical arrangements of the facility require such additional staff for the provision of adequate services.	T-22, §87411(a)
Responsible/Accountable Person on Premises	H&S §1569.618(b)(1)-(3)
<ul> <li>H&amp;S §1569.618(b) At least one administrator, facility manager, or designated substitute who is at least 21 years of age and has qualifications adequate to be responsible and accountable for the management and administration of the facility pursuant to Title 22 of the California Code of Regulations shall be on the premises 24 hours per day. The designated substitute may be a direct care staff member who shall not be required to meet the educational, certification, or training requirements of an administrator. The designated substitute shall meet qualifications that include, but are not limited to, all of the following: <ol> <li>(1) Knowledge of the requirements for providing care and supervision appropriate to each resident of the facility.</li> <li>(2) Familiarity with the facility's planned emergency procedures.</li> <li>(3) Training to effectively interact with emergency personnel in the event of an emergency call, including an ability to provide a resident's medical records to emergency responders.</li> </ol> </li></ul>	33,03,03
Sufficient Staffing	H&S
	§1569.618(c)(1)-(4)

<sup>&</sup>lt;sup>3</sup> H&S §1569.50 includes denying an application for licensure, suspending or revoking a license.

<ul> <li>H&amp;S §1569.618(c) The facility shall employ, and the administrator shall schedule, a sufficient number of staff members to do all of the following: <ul> <li>(1) Provide the care required in each resident's written record of care as described in Section 1569.80.</li> <li>(2) Ensure the health, safety, comfort, and supervision of the residents.</li> <li>(3) Ensure that at least one staff member who has cardiopulmonary resuscitation (CPR) training and first aid training is on duty and on the premises at all times. This paragraph shall not be construed to require staff to provide CPR.</li> <li>(4) Ensure that the facility is clean, safe, sanitary, and in good repair at all times.</li> </ul> </li> </ul>	
<b>T-22, §87411</b> (f) All personnel, including the licensee and administrator, shall be in good health, and physically and mentally capable of performing assigned tasks. Good physical health shall be verified by a health screening, including a chest x-ray or an intradermal test, performed by a physician not more than six (6) months prior to or seven (7) days after employment or licensure. A report shall be made of each screening, signed by the examining physician. The report shall indicate whether the person is physically qualified to perform the duties to be assigned, and whether he/she has any health condition that would create a hazard to him/herself, other staff members or residents. A signed statement shall be obtained from each volunteer affirming that he/she is in good health. Personnel with evidence of physical illness or emotional instability that poses a significant threat to the well-being of residents shall be relieved of their duties.	T-22, §87411(f)
Personnel Records/Staff Training	
H&S §1569.17. (b) In addition to the applicant, the provisions of this section shall apply to criminal record clearances and exemptions for the following persons:  (1) (A) Adults responsible for administration or direct supervision of staff.  (B) Any person, other than a client, residing in the facility. Residents of unlicensed independent senior housing facilities that are located in contiguous buildings on the same property as a residential care facility for the elderly shall be exempt from these requirements.  (C) Any person who provides client assistance in dressing, grooming, bathing, or personal hygiene. Any nurse assistant or home health aide meeting the requirements of Section 1338.5 or 1736.6, respectively, who is not employed, retained, or contracted by the licenses, and who has been certified or recentified on or after law 1, 1008, shall be deemed to meet the	H&S §1569.17(b)(1)- (2) T-22, §87355(e), (j), (k)
contracted by the licensee, and who has been certified or recertified on or after July 1, 1998, shall be deemed to meet the criminal record clearance requirements of this section. A certified nurse assistant and certified home health aide who will be providing client assistance and who falls under this exemption shall provide one copy of his or her current certification,	

<sup>&</sup>lt;sup>4</sup> Although the administrator, staff and volunteers may not be identified at the time of a Pre-Licensing Visit, the LPA confirm that any person subject to a criminal record clearance or exemption must have had the clearance/exemption prior to licensure.

prior to providing care, to the residential care facility for the elderly. The facility shall maintain the copy of the certification on file as long as the care is being provided by the certified nurse assistant or certified home health aide at the facility. Nothing in this paragraph restricts the right of the department to exclude a certified nurse assistant or certified home health aide from a licensed residential care facility for the elderly pursuant to Section 1569.58.

- (D) Any staff person, volunteer, or employee who has contact with the clients.
- (E) If the applicant is a firm, partnership, association, or corporation, the chief executive officer or other person serving in a similar capacity.
- (F) Additional officers of the governing body of the applicant or other persons with a financial interest in the applicant, as determined necessary by the department by regulation. The criteria used in the development of these regulations shall be based on the person's capability to exercise substantial influence over the operation of the facility.
- (2) The following persons are exempt from requirements applicable under paragraph (1):
  - (A) A spouse, relative, significant other, or close friend of a client shall be exempt if this person is visiting the client or provides direct care and supervision to that client only.
  - (B) A volunteer to whom all of the following apply:
    - (i) The volunteer is at the facility during normal waking hours.
    - (ii) The volunteer is directly supervised by the licensee or a facility employee with a criminal record clearance or exemption.
    - (iii) The volunteer spends no more than 16 hours per week at the facility.
    - (iv) The volunteer does not provide clients with assistance in dressing, grooming, bathing, or personal hygiene.
    - (v) The volunteer is not left alone with clients in care.
  - (C) A third-party contractor retained by the facility if the contractor is not left alone with clients in care.
  - (D) A third-party contractor or other business professional retained by a client and at the facility at the request or by permission of that client. These individuals shall not be left alone with other clients.
  - (E) Licensed or certified medical professionals are exempt from fingerprint and criminal background check requirements imposed by community care licensing. This exemption does not apply to a person who is a community care facility licensee or an employee of the facility.
  - (F) Employees of licensed home health agencies and members of licensed hospice interdisciplinary teams who have contact with a resident of a residential care facility at the request of the resident or resident's legal decisionmaker are exempt from fingerprint and criminal background check requirements imposed by community care licensing. This exemption does not apply to a person who is a community care facility licensee or an employee of the facility.
  - (G) Clergy and other spiritual caregivers who are performing services in common areas of the residential care facility, or who are advising an individual resident at the request of, or with permission of, the resident, are exempt from fingerprint and criminal background check requirements imposed by community care licensing. This exemption does not apply to a person who is a community care facility licensee or an employee of the facility.

(H) Any person similar to those described in this subdivision, as defined by the department in regulations.	
(I) Nothing in this paragraph shall prevent a licensee from requiring a criminal record clearance of any individual exempt	
from the requirements of this section, provided that the individual has client contact.	
T-22, §87355. (e) All individuals subject to a criminal record review pursuant to Health and Safety Code Section 1569.17(b) shall	
prior to working, residing or volunteering in a licensed facility:	
(1) Obtain a California clearance or a criminal record exemption as required by the Department or	
(2) Request a transfer of a criminal record clearance as specified in Section 87355(c) or	
(3) Request and be approved for a transfer of a criminal record exemption, as specified in Section 87356(r), unless, upon	
request for a transfer, the Department permits the individual to be employed, reside or be present at the facility.	
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(j) The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of employees in the	
individual's personnel file as required in Section 87412, Personnel Records.	
(k) The licensee shall maintain documentation of criminal record clearances or criminal record exemptions of volunteers that	
require fingerprinting and non-client adults residing in the facility.	
(1) Documentation shall be available at the facility for inspection by the Department.	
Personnel File <sup>5</sup>	T-22, §87412(a)-(d)
	& (g)
T-22, §87412. (a) The licensee shall ensure that personnel records are maintained on the licensee, administrator and each	
employee. Each personnel record shall contain the following information:	
(1) Employee's full name.	
(2) Social Security number.	
(3) Date of employment.	
(4) Written verification that the employee is at least 18 years of age, including, but not necessarily limited to, a copy of	
his/her birth certificate or driver's license.	
(5) Home address and telephone number.	
(6) Educational background.	
(A) For administrators this shall include verification that he/she meets the educational requirements in 87405(b) and (c).	
(A) For autilitistications this shall include verification that he/she meets the educational requirements in 87405(b) and (c).	
(7) Past experience, including types of employment and former employers.	

(8) Type of position for which employed.

(9) Termination date if no longer employed by the facility.

 $<sup>^{\</sup>rm 5}$  The LPA asks about the location of the personnel files.

is dependent upon the training and skills of staff. It is the intent of the Legislature in enacting this section to ensure that direct-care staff have the knowledge and proficiency to carry out the tasks of their jobs.	
H&S §87625(a) The Legislature finds that the quality of services provided to residents of residential care facilities for the elderly	(d)
General Training Requirements	H&S §1569.625(a)-
Note: Plan of Operation is required to include a training plan for staff.	
Staff Training	T-22, §87208(a)(6)
available to the licensing agency at the facility as specified in Section 87412(f).	
(g) All personnel records shall be maintained at the facility.  (1) The licensee shall be permitted to retain such records in a central administrative location provided that they are readily	
Recertification Requirements.	
(d) The licensee shall maintain documentation that an administrator has met the certification requirements specified in Section 87406, Administrator Certification Requirements or the recertification requirements in Section 87407, Administrator	
(c) Licensees shall maintain in the personnel records verification of required staff training and orientation.	
(B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87355(e).	
(A) A signed statement regarding their criminal record history as required by Section 87355(d).	
(2) Health screening documents as specified in Section 87411(e). (3) For volunteers that are required to be fingerprinted pursuant to Section 87355, Criminal Record Clearance:	
(1) A health statement as specified in Section 87411(e).	
(b) Personnel records shall be maintained for all volunteers and shall contain the following:	
(B) Documentation of either a criminal record clearance or a criminal record exemption as required by Section 87355(e).  1. For Certified Administrators, a copy their current and valid Administrative Certification meets this requirement	
(A) A signed statement regarding their criminal record history as required by Section 87355(d).	
(13) For employees that are required to be fingerprinted pursuant to Section 80355, Criminal Record Clearance:	
(11) A health screening as specified in Section 87411, Personnel Requirements - General.  (12) Hazardous health conditions documents as specified in Section 87411, Personnel Requirements - General.	
(10) Reasons for leaving.	

- (b) (1) The department shall adopt regulations to require staff members of residential care facilities for the elderly who assist residents with personal activities of daily living to receive appropriate training. This training shall consist of 40 hours of training. A staff member shall complete 20 hours, including six hours specific to dementia care, as required by subdivision (a) of Section 1569.626 and four hours specific to postural supports, restricted health conditions, and hospice care, as required by subdivision (a) of Section 1569.696, before working independently with residents. The remaining 20 hours shall include six hours specific to dementia care and shall be completed within the first four weeks of employment. The training coursework may utilize various methods of instruction, including, but not limited to, lectures, instructional videos, and interactive online courses. The additional 16 hours shall be hands-on training.
  - (2) In addition to paragraph (1), training requirements shall also include an additional 20 hours annually, eight hours of which shall be dementia care training, as required by subdivision (a) of Section 1569.626, and four hours of which shall be specific to postural supports, restricted health conditions, and hospice care, as required by subdivision (a) of Section 1569.696. This training shall be administered on the job, or in a classroom setting, or both, and may include online training.
  - (3) The department shall establish, in consultation with provider organizations, the subject matter required for the training required by this section.
- (c) The training shall include, but not be limited to, all of the following:
  - (1) Physical limitations and needs of the elderly.
  - (2) Importance and techniques for personal care services.
  - (3) Residents' rights.
  - (4) Policies and procedures regarding medications.
  - (5) Psychosocial needs of the elderly.
  - (6) Building and fire safety and the appropriate response to emergencies.
  - (7) Dementia care, including the use and misuse of antipsychotics, the interaction of drugs commonly used by the elderly, and the adverse effects of psychotropic drugs for use in controlling the behavior of persons with dementia.
  - (8) The special needs of persons with Alzheimer's disease and dementia, including nonpharmacologic, person-centered approaches to dementia care.
  - (9) Cultural competency and sensitivity in issues relating to the underserved, aging, lesbian, gay, bisexual, and transgender community.
- (d) This section shall not apply to certified nurse assistants, certified pursuant to Article 9 (commencing with Section 1337) of Chapter 2, licensed vocational nurses, licensed pursuant to Chapter 6.5 (commencing with Section 2840) of Division 2 of the Business and Professions Code, and registered nurses, licensed pursuant to Chapter 6 (commencing with Section 2700) of Division 2 of the Business and Professions Code, except both of the following shall apply:

<ul> <li>(1) A licensed or certified health professional with valid certification shall receive eight hours of training on resident characteristics, resident records, and facility practices and procedures prior to providing direct care to residents.</li> <li>(2) In addition to paragraph (1), a certified nurse assistant shall also receive the 12 hours of dementia care training specified in Section 1569.626 and the annual training specified in paragraph (2) of subdivision (b).</li> </ul>	
Resident Records/Incident Reports	
Resident Records	T-22, §87506(a) &
<b>T-22, §87506.</b> (a) The licensee shall ensure that a separate, complete, and current record is maintained for each resident in the facility or in a central administrative location readily available to facility staff and to licensing agency staff.	(c)(1)
<ul><li>(c) All information and records obtained from or regarding residents shall be confidential.</li><li>(1) The licensee shall be responsible for storing active and inactive records and for safeguarding the confidentiality of their contents. The licensee and all employees shall reveal or make available confidential information only upon the resident's written consent or that of his designated representative.</li></ul>	
<b>H&amp;S §1569.267</b> (a) At admission, a facility staff person shall personally advise a resident and the resident's representative of, and give a complete written copy of, the rights in this article and the personal rights in Section 87468 of Title 22 of the California Code of Regulations. The licensee shall have each resident and the resident's representative sign and date a copy of the resident's rights, and the licensee shall include the signed and dated copy in the resident's record.	H&S §1569.267(a)
Register of Residents	T-22, §87508(a)(1)- (3)
<ul> <li>T-22, §87508(a) The licensee shall ensure that a current register of all residents in the facility is maintained and contains the following updated information: <ol> <li>(1) The resident's name and ambulatory status as specified in Section 87506(b)(1) and (b)(10).</li> <li>(2) Information on the resident's attending physician as specified in Section 87506(b)(7).</li> <li>(3) Information on the resident's responsible person as specified in Section 87506(b)(6).</li> </ol> </li> </ul>	,
T-22, §87508(b) Registers of residents shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours. Registers may be removed if necessary for copying. Removal of registers shall be subject to the following requirements:  (1) Licensing representatives shall not remove current registers unless the same information is otherwise readily available in	T-22, §87508(b)(1)- (3)
another document or format. (2) Prior to removing any registers, a licensing representative shall prepare a list of the registers to be removed, sign and date the list upon removal of the records, and leave a copy of the list with the administrator or designee.	

the date the records were removed.	
T-22, §87508(c) The register of current residents shall be kept in a central location at the facility.	T-22, §87508(c)(1)
(1) The register shall be treated as confidential information pursuant to Section 87506(c).	
Resident Rights/Information	
Resident Rights Posted	H&S §1569.267(b)
<b>H&amp;S §1569.267</b> (b) Licensees shall prominently post, in areas accessible to the residents and their representatives, a copy of the residents' rights.	
Visiting Policy	H&S, §1569.313
<b>H&amp;S §1569.313.</b> Each residential care facility for the elderly shall state, on its client information form or admission agreement, and on its patient's rights form, the facility's policy concerning family visits and other communication with resident clients and shall promptly post notice of its visiting policy at a location in the facility that is accessible to residents and families.	
The facility's policy concerning family visits and communication shall be designed to encourage regular family involvement with the resident client and shall provide ample opportunities for family participation in activities at the facility.	
Resident Council <sup>6</sup>	H&S §1569.157(a), (h)
<b>H&amp;S §1569.157(a)</b> Every licensed residential care facility for the elderly, at the request of two or more residents, shall assist the residents in establishing and maintaining a single resident council at the facility. The resident council shall be composed of residents of the facility. Family members, resident representatives, advocates, long-term care ombudsman program representatives, facility staff, or others may participate in resident council meetings and activities at the invitation of the resident council.	
(h) The text of this section with the heading "Rights of Resident Councils" shall be posted in a prominent place at the facility accessible to residents, family members, and resident representatives.	
Family Council	H&S §1569.158(g)(1)-(3)
<b>H&amp;S §1569.158</b> (g) (1) If a facility has a family council, the facility shall include notice of the family council and its meetings to	
family members and resident representatives in routine mailings and shall inform family members and resident representatives	
of new and current residents who are identified on the admissions agreement during the admissions process or in the resident's	

<sup>&</sup>lt;sup>6</sup> LPAs must check that text of H&S Code §1569.157 are posted in accordance with subsection (h).

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records, of the existence of the family council, the time and place of meetings of the family council, and the name of the family	
council representative.	
(2) If a facility does not have a family council, the facility shall provide, upon admission of a new resident, written	
information to the resident's family or resident representative of their right to form a family council.	
(3) Upon request, and with the permission of the family council, the facility shall share the name and contact information of	
the designated representative of the family council with the long-term care ombudsman program.	
H&S §1569.33. (i) (1) The department shall design, or cause to be designed, a poster that contains information on the	H&S §1569.33(i)(1)-
appropriate reporting agency in case of a complaint or emergency.	(2)
(2) Each residential care facility for the elderly shall post this poster in the main entryway of its facility.	T-22, §87468(c)(1)-
	(2)
T-22, §87468 (c) Facilities licensed for seven (7) or more shall prominently post, in areas accessible to the residents and their	
relatives, the following:	
(1) Procedures for filing confidential complaints.	
(2) A copy of these rights or, in lieu of a posted copy, instructions on how to obtain additional copies of these rights.	
Admission Agreement	H&S §1569.881(b)
<b>H&amp;S §1569.881.</b> (b) Every residential care facility for the elderly shall conspicuously post in a location accessible to the public	
view within the facility either a complete copy of the admission agreement or a notice of its availability from the facility.	
Planned Activities <sup>7</sup>	
Resident Participation in Planned Activities	T-22, §87219(a)(1)-
	(6), (b)
T-22, §87219(a) Residents shall be encouraged to maintain and develop their fullest potential for independent living through	
participation in planned activities. The activities made available shall include:	
(1) Socialization, achieved through activities such as group discussion and conversation, recreation, arts, crafts, music, and	
care of pets.	
(2) Daily living skills/activities which foster and maintain independent functioning.	
(3) Leisure time activities cultivating personal interests and pursuits, and encouraging leisure-time activities with other	
residents.	
(4) Physical activities such as games, sports and exercise which develop and maintain strength, coordination and range of	
motion.	
(5) Education, achieved through special classes or activities.	
(a) Education, doinered an odbit special classes of delivities.	

<sup>&</sup>lt;sup>7</sup> Since the interests, preferences and abilities of future residents are not known, the LPA will ask about the prospective licensee's approach to planned activities and using community resources.

(6) Provision for free time so residents may engage in activities of their own choosing.	
(b) Residents served shall be encouraged to contribute to the planning, preparation, conduct, clean-up and critique of the planned activities.	
Community-Centered Activities	T-22, §87219(c)
<ul> <li>T-22, §87219(c) The licensee shall arrange for utilization of available community resources through contact with organizations and volunteers to promote resident participation in community-centered activities which may include: <ol> <li>(1) Attendance at the place of worship of the resident's choice.</li> <li>(2) Service activities for the community.</li> <li>(3) Community events such as concerts, tours and plays.</li> <li>(4) Participation in community organized group activities, such as senior citizen groups, sports leagues and service clubs.</li> </ol> </li> </ul>	
Food Service	
Food Service - General Requirements  T-22, §87555.	T-22, §87555(b)(3), (6), (7), (19), (20), (21), (22), (24), (25), (26), (31), & (32)
<ul> <li>(b) The following food service requirements shall apply:</li> <li>(3) Between-meal nourishment or snacks shall be made available for all residents unless limited by dietary restrictions prescribed by a physician.</li> <li>(6) In facilities for sixteen (16) persons or more, menus shall be written at least one week in advance and copies of the menus as served shall be dated and kept on file for at least 30 days.</li> <li>Facilities licensed for less than sixteen (16) residents shall maintain a sample menu in their file. Menus shall be made available for review by the residents or their designated representatives and the licensing agency upon request.</li> <li>(7) Modified diets prescribed by a resident's physician as a medical necessity shall be provided.</li> <li>(19) There shall be one or more dining rooms or similar areas suitable for serving residents at a meal service, in shifts where appropriate. The dining areas shall be convenient to the kitchen so that food may be served quickly and easily and shall be attractive and promote socialization among the diners.</li> <li>(20) The ventilating systems in food preparation areas shall be maintained in working order and shall be operated when food is being prepared. Food preparation equipment shall be placed to provide aisles of sufficient width to permit easy movement of personnel, mobile equipment and supplies.</li> <li>(21) Freezers of adequate size shall be maintained at a temperature of 0 degree F (-17.7 degree C), and refrigerators of adequate size shall maintain a maximum temperature of 40 degree F. (4 degree C). They shall be kept clean and food stored to enable adequate air circulation to maintain the above temperatures.</li> </ul>	

(22) Adequate space shall be maintained to accommodate equipment, personnel and procedures necessary for proper	
cleaning and sanitizing of dishes and other utensils.	
(24) Pesticides and other toxic substances shall not be stored in food storerooms, kitchen areas, or where kitchen equipment	
or utensils are stored.	
(25) Soaps, detergents, cleaning compounds or similar substances shall be stored in areas separate from food supplies.	
(26) Supplies of nonperishable foods for a minimum of one week and perishable foods for a minimum of two days shall be	
maintained on the premises.	
(31) Dishes and utensils shall be disinfected:	
(A) In facilities using mechanical means, by either maintaining hot water at a minimum temperature of 170 degree F (77	
degree C) at the final rinse cycle of dishwashing machines, or by disinfecting as specified in (B) below.	
(B) In facilities not using mechanical means, by an alternative comparable method approved by the licensing agency or	
by the local health department, such as the addition of a sanitation agent to the final rinse water.	
(32) Equipment of appropriate size and type shall be provided for the storage, preparation and service of food and for	
sanitizing utensils and tableware, and shall be well maintained.	
Residents with Special Health Needs	
Prohibited Health Conditions	T-22, §87615(a)(1)-
	(6)
T-22, §87615(a) Persons who require health services for or have a health condition including, but not limited to, those specified	
below shall not be admitted or retained in a residential care facility for the elderly:	
(1) Stage 3 and 4 pressure sores (dermal ulcers).	
(2) Gastrostomy care.	
(3) Naso-gastric tubes.	
(4) Staph infection or other serious infection.	
(5) Residents who depend on others to perform all activities of daily living for them as set forth in Section 87459, Functional	
Capabilities.	
(6) Tracheostomies.	
(b) Tracheostoniles.	
Restricted Health Conditions	T-22, §87612(a)(1)-
Restricted Health Conditions	T-22, §87612(a)(1)- (11)
Restricted Health Conditions  T-22, §87612 (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who	
Restricted Health Conditions  T-22, §87612 (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who require any of the following health services:	
Restricted Health Conditions  T-22, §87612 (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who require any of the following health services:  (1) Administration of oxygen as specified in Section 87618.	
Restricted Health Conditions  T-22, §87612 (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who require any of the following health services:  (1) Administration of oxygen as specified in Section 87618.  (2) Catheter care as specified in Section 87623.	
Restricted Health Conditions  T-22, §87612 (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who require any of the following health services:  (1) Administration of oxygen as specified in Section 87618.  (2) Catheter care as specified in Section 87623.  (3) Colostomy/ileostomy care as specified in Section 87621.	
Restricted Health Conditions  T-22, §87612 (a) The licensee may provide care for residents who have any of the following restricted health conditions, or who require any of the following health services:  (1) Administration of oxygen as specified in Section 87618.  (2) Catheter care as specified in Section 87623.	

	(8)	
Plan for Incidental Medical and Dental Services	T-22, §87465(a)(1)-	
Incidental Medical and Dental		
(E) Two pairs of unused medical examination gloves (latex or non-latex).		
infectious disease.		
(D) A cardiovascular pulmonary resuscitation barrier (a face shield or mask) for protection from transmission of		
(C) A safety razor for shaving chest hair when necessary to apply the pads.		
(B) An extra set of pads.		
(A) A back-up battery set.		
the following:		
(4) A supply kit shall be maintained at the facility and be readily available for use with the AED. The kit shall contain at least		
at the facility.		
completed complies with the standards of the American Heart Association or the American Red Cross shall be available		
Association or the American Red Cross. If it does not, then other evidence indicating that the AED training course		
certificate shall indicate that the AED training course completed complies with the standards of the American Heart		
(D) A copy of a valid AED operator's certificate for any employee(s) authorized by the licensee to operate the AED. The		
(C) A log of checks of operation of the AED containing the dates checked and the name of person checking.		
(B) A training manual from an American Heart Association- or American Red Cross-recognized AED training class.		
(3) The licensee shall maintain at the facility the following:		
applicable federal and other state requirements.		
(1) The licensee shall notify the licensing agency in writing that an AED is in the facility and will be used in accordance with all		
met:		
<b>T-22, §87607.</b> (a) A licensee is permitted to maintain and operate an AED at the facility if all of the following requirements are		
· · · · · · · · · · · · · · · · · · ·	(a)(3)(B)-(D) & (a)(4)	
Automated External Defibrillator [AED] <sup>8</sup>	T-22, §87607(a)(1),	
(11) Wound care as specified in Section 87631.		
(10) Stage 1 and 2 pressure sores (dermal ulcers) as specified in Section 87631(a)(3).		
(9) Intermittent Positive Pressure Breathing Machine use as specified in Section 87619.		
(8) Injections as specified in Section 87629.		
<ul><li>(6) Enemas, suppositories, and/or fecal impaction removal as specified in Section 87622.</li><li>(7) Incontinence of bowel and/or bladder as specified in Section 87625.</li></ul>		
(5) Diabetes as specified in Section 87628.		

<sup>&</sup>lt;sup>8</sup> Ask if the facility intends to maintain and operate an AED. Check that the facility is compliant with the requirements listed.

DRAFI	
T-22, §87465(a) A plan for incidental medical and dental care shall be developed by each facility. The plan shall encourage	
routine medical and dental care and provide for assistance in obtaining such care, by compliance with the following:	
(1) The licensee shall arrange, or assist in arranging, for medical and dental care appropriate to the conditions and needs of	
residents.	
(2) The licensee shall provide assistance in meeting necessary medical and dental needs. This includes transportation which	
may be limited to the nearest available medical or dental facility which will meet the resident's need. In providing	
transportation the licensee shall do so directly or make arrangements for this service.	
(3) There shall be arrangements for separation and care of residents whose illness requires separation from others.	
(4) When residents require prosthetic devices, vision and hearing aids, the staff shall be familiar with the use of these	
devices, and shall assist such persons with their utilization as needed.	
(5) The licensee shall assist residents with self-administered medications as needed.	
(6) Facility staff, except those authorized by law, shall not administer injections, but staff designated by the licensee may	
assist persons with self-administration as needed. Assistance with self-administered medications shall be limited to the	
following:	
(A) Medications usually prescribed for self-administration which have been authorized by the person's physician.	
(B) Medications during an illness determined by a physician to be temporary and minor.	
(C) Assistance required because of tremor, failing eyesight and similar conditions.	
(D) Assistance with self-administration does not include forcing a resident to take medications, hiding or camouflaging	
medications in other substances without the resident's knowledge and consent, or otherwise infringing upon a resident's	
right to refuse to take a medication.	
(7) When requested by the prescribing physician or the Department, a record of dosages of medications which are	
centrally stored shall be maintained by the facility.	
(8) There shall be adequate privacy for first aid treatment of minor injuries and for examination by a physician if required.	
First Aid Kit	T-22, §87465(a)(9)
T 22 SOZACE (-)(0) If a facility has no modified with an the arrounds a complete first aid bit shall be reciptained and be readily.	
T-22, §87465. (a)(9) If a facility has no medical unit on the grounds, a complete first aid kit shall be maintained and be readily	
available in a specific location in the facility. The kit shall be a general type approved by the American Red Cross, or shall contain	
at least the following:  (A) A suggest a distance of a first aid manual approved by the American Red Cross, the American Medical Association or a	
(A) A current edition of a first aid manual approved by the American Red Cross, the American Medical Association or a	
state or federal health agency. (B) Sterile first aid dressings.	
(C) Bandages or roller bandages.	
(C) Dalidages of Toller Dalidages.	

(D) Scissors.(E) Tweezers.

(F) Thermometers.	
Assistance with Self-Administration of Medications	T-22, §87465(a)(6)(A)-(D)
T-22, §87465(a) (6) Facility staff, except those authorized by law, shall not administer injections, but staff designated by the	
licensee may assist persons with self-administration as needed. Assistance with self-administered medications shall be limited to	
the following:	
(A) Medications usually prescribed for self-administration which have been authorized by the person's physician.	
(B) Medications during an illness determined by a physician to be temporary and minor.	
(C) Assistance required because of tremor, failing eyesight and similar conditions.	
(D) Assistance with self-administration does not include forcing a resident to take medications, hiding or camouflaging	
medications in other substances without the resident's knowledge and consent, or otherwise infringing upon a resident's	
right to refuse to take a medication.	
Written Prescription Order for all Prescription/Non-Prescription	T-22, §87465(e)(1)-
T-22, §87465 (e) For every prescription and nonprescription PRN medication for which the licensee provides assistance there	(4)
shall be a signed, dated written order from a physician on a prescription blank, maintained in the resident's file, and a label on	
the medication. Both the physician's order and the label shall contain at least all of the following information.	
(1) The specific symptoms which indicate the need for the use of the medication.	
(2) The exact dosage.	
(3) The minimum number of hours between doses.	
(4) The maximum number of doses allowed in each 24-hour period.	
Centrally-Stored Medicines – Safe and Locked Place	T-22, §87465(h)(2)
T-22, §87465. (h) The following requirements shall apply to medications which are centrally stored:	
(1) Medications shall be centrally stored under the following circumstances:	
(A) The preservation of medicines requires refrigeration, if the resident has no private refrigerator.	
(B) Any medication is determined by the physician to be hazardous if kept in the personal possession of the person for	
whom it was prescribed.	
(C) Because of potential dangers related to the medication itself, or due to physical arrangements in the facility and the	
condition or the habits of other persons in the facility, the medications are determined by either a physician, the	
administrator, or Department to be a safety hazard to others.	
(2) Centrally stored medicines shall be kept in a safe and locked place that is not accessible to persons other than employees	
responsible for the supervision of the centrally stored medication	
Emergency Care	T-22, §87465(f)(1)- (3)

<ul> <li>T-22, §87465 (f) Emergency care requirements shall include the following: <ol> <li>The name, address, and telephone number of each resident's physician and dentist shall be readily available to that resident, the licensee, and facility staff.</li> <li>The name, address and telephone number of each emergency agency to be called in the event of an emergency, including but not limited to the fire department, crisis center or paramedical unit or medical resource, shall be posted in a location visible to both staff and residents.</li> </ol> </li> </ul>	
(3) The name and telephone number of an ambulance service shall be readily available.	T 22 COT46T/ )
<b>T-22, §87465</b> (g) The licensee shall immediately telephone 9-1-1 if an injury or other circumstance has resulted in an imminent threat to a resident's health including, but not limited to, an apparent life-threatening medical crisis except as specified in Sections 87469(c)(2), (c)(3), or (c)(4).	T-22, §87465(g)
Disaster Preparedness	
Emergency Plan/Disaster & Mass Casualty Plan  H&S §1569.695(c) The department's Community Care Licensing Division shall confirm, during comprehensive licensing visits, that the plan is on file at the facility.	H&S §1569.695(c);(e) T-22, §87212(a)
(e) This subdivision shall not apply to residential care facilities for the elderly that have obtained a certificate of authority to offer continuing care contracts, as defined in paragraph (5) of subdivision (c) of Section 1771.	
<b>T-22, §87212.</b> (a) Each facility shall have a disaster and mass casualty plan of action. The plan shall be in writing and shall be readily available.	